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Date: April 25, 2005

FACSIMILE COVER LETTER

Facsimile Number: 703-872-9306

To: Examiner M. Dimyan
           Group Art Unit 2825, USPTO
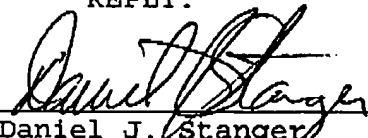
From: Mr. Daniel J. Stanger
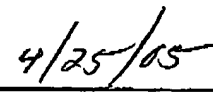   MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re: USSN 10/073,312
           Attorney Docket No.: `ASA-1062

CERTIFICATION OF FACSIMILE TRANSMISSION

     I hereby certify that the following listed documents are
being facsimile transmitted to the U.S. Patent and Trademark
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     AMENDMENT TRANSMITTAL; and
     REPLY.

_____   _____
Daniel J. Stanger   Date 4/25/05
Reg. No. 32,846

Total Number of Pages (including cover sheet): 15

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please CALL (703) 684-1120. Thank you.

FORM PTO-1083

PATENT

Case Docket No. ASA-1062

In RE application of T. SASAKI et al

Serial No.: 10/073,312

Group Art Unit: 2825

Filed: February 13, 2002

Examiner: M. Dimyan

For: DESIGN METHOD AND SYSTEM FOR SEMICONDUCTOR INTEGRATED CIRCUITS (AS AMENDED)

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identfied application.

☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

☒ No additional fee is required.

The fee has been calculated as shown below:

(COL. 1) Claims Remaining After Amendment		(COL. 2) Highest No. Previously Paid For	(COL. 3) Present Extra	SMALL ENTITY Rate	Additional Fee	OR	OTHER THAN A SMALL ENTITY Rate	Additional Fee
Total • 10	Minus	•• 20	- 0	x 9	$		x 18	$ 0
Indep. • 3	Minus	••• 5	= 0	x 42	$		x 84	$ 0
☐ First Presentation of Multiple Dependent Claims				+ 140	$		+ 280	$ 0
				Total	$	OR	Total	$ 0

• If the entry in Col. 1 is less than the entry in Col. 2, write '0' in Col. 3.
•• If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, write '20' in this space.
••• If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, write '3' in this space.
The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

☐ Please charge my Deposit Account No. 50-1417 in the amount of $_____.

☐ A check in the amount of $_____ is attached in payment of:
_____.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1417. .

☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

☒ Any patent application processing fees under 37 CFR 1.17.

☒ Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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By: _____
Daniel J. Stanger
Registration No. 32,846
Attorney for Applicant(s)

Date: April 25, 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

    T. SASAKI et al

Serial No. 10/073,312   Group Art Unit: 2825

Filed: February 13, 2002   Examiner: M. Dimyan

For: DESIGN METHOD AND SYSTEM FOR
     ACHIEVING A MINIMUM MACHINE
     CYCLE FOR SEMICONDUCTOR INTEGRATED
     CIRCUITS (AS AMENDED)

REPLY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450   April 25, 2005

Sir:

In reply to the final rejection mailed August 25, 2004,

and further to the Notice of Appeal filed February 25, 2005,

please amend the above-identified application as follows.